

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations 1.56(a). I further acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations 1.56(a), which occurred between the filing date of the prior application and the national or PCT international filing date of this continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificates having a filing date before that of the application on which priority is claimed:

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURES

Full Name of Sole or First Inventor: MICHAEL G. SIEFF

Signature: 

Date: 8/11/2003 Country of Citizenship: USA

Residence: 605 Inwood Dr., Santa Barbara, CA 93111

Post Office Address: same

Full Name of Second Inventor: DON R. KUHN

Signature: 

Date: 8/11/03 Country of Citizenship: USA

Residence: 1516 Dickey St., Fallbrook, CA 92028

Post Office Address: same

Matter No:

INVENTOR DECLARATION

As the below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type:

<u> X </u>	original
<u> </u>	design
<u> </u>	substitution
<u> </u>	divisional
<u> </u>	continuation
<u> </u>	continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

My residence, post office address, and citizenship are as stated below next to my name, I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) on the subject matter which is claimed and for which a patent is sought on the invention entitled.

TITLE OF INVENTION

LIFE INSURANCE CONTINUATION PLAN

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a) or (b))

(a) X is attached hereto.

(b) was filed on as
Application Serial No.
and was amended on